



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

**RECEIVED**

By Carol Day at 8:23 am, Oct 05, 2015

Complete this report in duplicate at the time of the regular monthly preventative  
Send copy to Department of Health and Senior Services; retain original in department.

|                                                                                        |                           |                                  |
|----------------------------------------------------------------------------------------|---------------------------|----------------------------------|
| ALCO SENSOR IV SN<br>026999                                                            | PRINTER SN<br>13.1891.096 | DATE OF INSPECTION<br>10-04-2015 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>501 FARAON ST SAINT JOSEPH, MISSOURI 64501 |                           | TIME OF INSPECTION<br>2136       |

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (1 O-C - 40-C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

☐ SIMULATOR SOLUTION

☒ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER \_\_\_\_\_ INTOXIMETERS \_\_\_\_\_ LOT # AG428002 EXP. DATE 10-07-2016

☐ SIMULATOR TEMPERATURE (34°C ± 0.2°C) \_\_\_\_\_ SIMULATOR SN \_\_\_\_\_ SIMULATOR EXP DATE \_\_\_\_\_

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

|                   |                   |                   |
|-------------------|-------------------|-------------------|
| TEST 1 w-<br>.101 | TEST 2 w-<br>.100 | TEST 3 w-<br>.100 |
|-------------------|-------------------|-------------------|

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

|          |   |         |   |           |   |           |   |           |   |           |   |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|-----------|---|
| REFUSALS | 0 | (0-.04) | 0 | (.05-.09) | 0 | (.10-.14) | 0 | (.15-.19) | 0 | (OVER.19) | 0 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|-----------|---|

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

**INSPECTING OFFICER:**

|                                                                 |                                    |
|-----------------------------------------------------------------|------------------------------------|
| SIGNATURE<br>                                                   | PRINT NAME<br>BRAD KERNS           |
| TYPE 11 PERMIT NUMBER/EXPIRATION DATE<br>250129 EXP. 06-08-2017 | TELEPHONE NUMBER<br>(816) 271-5359 |

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901



Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63103  
Ph: (314) 533-3100  
Fax: (314) 533-7328

## Certificate of Analysis

Customer Name  
Intoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Test Date: 8-Oct-2014

Lot # AG428002

Exp. Date  
7-Oct-2016

Cyl. Type  
108

Component  
Ethanol  
Nitrogen

Certified Concentration  
0.100  $\pm$  2% BrAC (272 ppm)  
Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

| <u>Serial No.</u> | <u>Concentration</u> |
|-------------------|----------------------|
| EB0010581         | 391.8 ppm            |
| EB0010570         | 259.8 ppm            |
| EB0010285         | 209.0 ppm            |
| EB0010561         | 103.7 ppm            |
| EB0010681         | 52.22 ppm            |

| <u>Serial No.</u> | <u>Concentration</u> |
|-------------------|----------------------|
| EB0010603         | 392.5 ppm            |
| EB0010559         | 258.9 ppm            |
| EB0010595         | 208.9 ppm            |
| EB0010562         | 104.9 ppm            |
| EB0010579         | 52.94 ppm            |

Analytical Method: NDIR

Digitally signed by Quality Control  
Date: 2014.10.08 12:18:00 -05:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

Analyst: \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

|                                             |      |                                             |    |                                             |      |                                             |    |
|---------------------------------------------|------|---------------------------------------------|----|---------------------------------------------|------|---------------------------------------------|----|
| AS IV Serial no: 026999<br>Version no: 7409 |      | AS IV Serial no: 026999<br>Version no: 7409 |    | AS IV Serial no: 026999<br>Version no: 7409 |      | AS IV Serial no: 026999<br>Version no: 7409 |    |
| TEST RECORD 01699                           |      | TEST RECORD 01699                           |    | TEST RECORD 01699                           |      | TEST RECORD 01699                           |    |
| Temp                                        | Date | Time                                        | s/ | Temp                                        | Date | Time                                        | s/ |
| Air Blank:                                  |      | 10/04/15 21:36 .000                         |    | Air Blank:                                  |      | 10/04/15 21:42 .000                         |    |
| Calibration Check:                          |      | 20 10/04/15 21:36 .101                      |    | Calibration Check:                          |      | 21 10/04/15 21:42 .100                      |    |
| Subject Name                                |      | Subject Name                                |    | Subject Name                                |      | Subject Name                                |    |
| Subject I.D.                                |      | Subject I.D.                                |    | Subject I.D.                                |      | Subject I.D.                                |    |
| Klaus                                       |      | Klaus                                       |    | Klaus                                       |      | Klaus                                       |    |
| Operator Name, I.D.                         |      | Operator Name, I.D.                         |    | Operator Name, I.D.                         |      | Operator Name, I.D.                         |    |
| Location                                    |      | Location                                    |    | Location                                    |      | Location                                    |    |



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

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**PERMIT**  
**TYPE II**  
**BRAD KERNS**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER, INTOX EC/IR II, ALCO-SENSOR IV W/PRINTER**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 6/8/2015

NUMBER 250129

EXPIRES 6/8/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 583-07/1 (6-10)

LAB 4 (76-10)

 **STATE OF MISSOURI**  
**DEPARTMENT OF HEALTH AND SENIOR SERVICES**  
**BREATH ALCOHOL PROGRAM**

**INSTRUMENT OPERATOR CARD**

*The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.*



Operator **KERNS, BRAD**  
Permit No **250129**  
Date Issued **6/8/2015** Date Expires **6/8/2017**